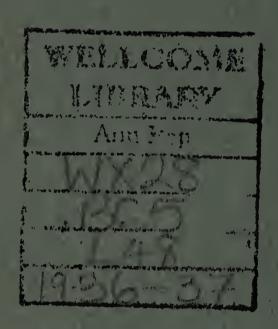
# The Leeds Joint Hospitals Advisory Committee.

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## FIRST Annual Report 1936-1937.

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#### PREAMBLE.

Prior to the passing of the Local Government Act, 1929, there existed no defined or effective scheme of co-ordination between the municipal and voluntary bodies providing hospital facilities in the city. The Voluntary Hospitals had individually extended and developed without seeking to ensure that that development formed part of a concerted scheme to avoid overlapping and duplication, though subsequently the need for co-ordination was realised and action taken, by the formation of the Leeds Voluntary Hospitals Council, to establish an advisory body which without interference with the autonomy of the hospitals concerned, would deal with matters of a joint adminisadvise the constituent hospital authorities trative nature, policy, matters of and formulate proposals provision and utilisation of hospital bed accommodation so as to ensure that the best possible use was made of the accommodation in order to provide the most efficient service for the sick.

The municipal hospitals, which, prior to the passing of the Act were restricted to the treatment of the destitute sick, have been developed as municipal hospitals with adequate staffing and modern equipment for the treatment of all classes of the community, the criterion for treatment being medical need

rather than destitution.

There was, however, no policy of co-ordination between the municipal and voluntary hospital authorities, though developments in connection with the Municipal Hospital resulted in

extended utilisation as an acute general hospital.

Section 13 of the Local Government Act, 1929, laid down "that the council of every county and county borough shall, when making provision for hospital accommodation in discharge of the functions transferred to them under this Act, consult such committee or other body as they consider to represent both the governing bodies and the medical and surgical staffs of the voluntary hospitals providing services in or for the benefit of the county or county borough as to the accommodation to be provided and as to the purposes for which it is to be used."

Accordingly, therefore, in October, 1936, after the appropriation of the Public Assistance Hospitals, a conference was held between Members of the Health Committee and the Voluntary Hospitals Council, at which the question of consultation in accordance with the provisions of Section 13 was discussed, and, as a result, the formation of a Joint Hospitals Advisory Committee

was agreed upon.

This proposal was approved by the City Council and the Voluntary Hospitals Council and the first meeting of the newly constituted Advisory Committee was held on December 8th, 1936.

G. W. Martin, Chairman.
J. Johnstone Jervis, Convener.

#### LIST OF MEMBERS.

Chairman—Alderman Sir GEORGE W. MARTIN, K.B.E., J.P.

#### Representing the Leeds City Council:-

Alderman Sir George W. Martin, K.B.E., J.P. (Chairman of the Health Committee).

Councillor D. Beevers (Deputy-Chairman, Health Committee).

Alderman Elizabeth Booth (Chairman, Hospitals Sub-Committee).

Alderman A. E. Weaver (Chairman, Maternity and Child Welfare Sub-Committee).

Councillor G. Brett.

#### Representing the Voluntary Hospitals Committee:

- A. P. Nicholson, Esq. (Chairman, Board of Management, Leeds General Infirmary).
- Col. C. H. Tetley (Chairman, Board of Management, Hospital for Women at Leeds).
- P. Austyn Barran, Esq. (Chairman, Board of Management, Maternity Hospital, Leeds).
- G. W. WATSON, Esq., M.D., F.R.C.P., M.R.C.S.
- L. R. Braithwaite, Esq., M.B., CH.B., F.R.C.S.

#### Ex-officio Members:—

- J. Johnstone Jervis, Esq., m.d., d.p.h. (Medical Officer of Health).
- J. DICK, Esq., M.B., CH.B., D.P.H. (Medical Superintendent, Municipal Hospitals).
- S. CLAYTON FRYERS, Esq., F.H.O.A. (House Governor and Secretary Leeds General Infirmary).

#### CONVENER:-

J. Johnstone Jervis, Esq., M.D., D.P.H.,
Medical Officer of Health,
Health Department,
12, Market Buildings,
Vicar Lane,
LEEDS, 1.

#### CONSTITUTION.

- (A) A Joint Hospitals Advisory Committee shall be established composed of ten members—five to be appointed by the Health Committee and five by the Voluntary Hospitals Committee, with the Medical Officer of Health and the House Governor and Secretary of the General Infirmary as ex officio members.
- (B) The Committee shall be empowered to invite the attendance, in an advisory capacity, of additional representatives of the municipal and voluntary hospitals where this is deemed necessary or desirable.
- (c) The Medical Officer of Health shall act as Convener of the Committee.
- (D) The Medical Superintendent of the Municipal Hospitals shall act with the Medical Officer of Health in an advisory capacity.
- (E) Representatives desiring to bring forward special proposals in connection with any hospital shall be allowed to attend for this purpose.
- (F) The Committee shall meet once quarterly, and meetings shall be convened at intervening periods on the request of any member for the consideration of urgent business.
- (G) Matters for the agenda shall be communicated to the Convener not less than fourteen days before the time of the meeting.
- (H) Minutes of the meetings shall be circulated to members.

October 19th, 1936.

December 8th, 1936.

#### ANNUAL REPORT, 1936-37.

#### Committee Meetings and Attendances.

The Committee held five meetings during the year. The average attendance at each meeting was 10.4. Of the five meetings, two were joint meetings with representatives of the West Riding County Council Public Health Committee. In addition, a visit with representatives of the West Riding authority was paid to the Marguerite Hepton Memorial Orthopaedic Hospital, Thorp Arch. The venue of the meetings was as follows:—

Civic Hall	••••	••••	2	meetings.
Leeds General Infirmary	• • • •	••••	1	meeting.
St. James's Hospital			1	do.
County Hall, Wakefield			1	do.

### Co-opted Members.

Professor C. W. Vining, M.D., B.S., D.P.H., F.R.C.P., and R. Broomhead, Esq., M.B., CH.B., F.R.C.S., were invited to attend meetings of the Committee in an advisory capacity to discuss special reports prepared by them regarding the hospital treatment of sick children and orthopaedic and fracture services. Professor Vining and Mr. Broomhead each attended three meetings.

### Report of the Year's Work.

A résumé of the work undertaken by the Committee during the year appears in the succeeding pages.

At the Conference held on October 19th, Hospital Admissions 1936, which resulted in the formation of the Advisory Committee, certain matters falling within the ambit of the new Committee were discussed, and the following decisions reached:—

(a) That there should be no out-patient department at St. James's Hospital.

(b) That a "follow-up" department be established at St. James's Hospital for the observation and treatment

of former in-patients.

(c) That facilities be made available for the interchange of cases (out-patients and in-patients) between the Leeds General Infirmary and St. James's Hospital, and that the reference of cases should be governed by the availability of accommodation, with the exception that patients requiring special treatment (e.g., Deep X-Ray) available only at the General Infirmary, and those required for teaching purposes would be retained at that institution, and that transfers to St. James's Hospital should be restricted to Leeds residents.

The increase in accidents, suicides and emergency cases has resulted in serious overcrowding at the Accidents and General Infirmary, and to relieve the pressure at Suicides. that institution it was agreed that a proportion of these cases be referred to St. James's Hospital. Owing to the fact that there is as yet no casualty department at the latter hospital, it was decided that for the time being the Infirmary Casualty Department should serve the needs of both institutions, suitable cases being diverted to St. James's Hospital by the Receiving Officers. It was further agreed that when St. James's Hospital is equipped to deal with casualties, the city be zoned, certain of the areas being allocated to the Leeds General Infirmary and certain to St. James's Hospital, each hospital to receive only the accidents and emergency cases from its own area.

Orthopaedic and (a) the Interim Report of the Inter-Depart-Fracture Services. mental Committee on the Rehabilitation of Persons injured by accidents, (b) a report by the Central Council for the Care of Cripples for co-ordinating existing, and providing additional facilities for diagnosis, treatment and after-care of orthopaedics in the County of Yorkshire, and (c) a report prepared by Mr. R. Broomhead, M.B., CH.B., F.R.C.S., dealing with facilities for orthopaedics which had been prepared at the request of the Committee.

The need for associating orthopaedic and fracture services was emphasised, and the Committee accepted the view that fractures and short-term orthopaedics should continue to be treated at the Leeds General Infirmary, suitable cases also being referred to St. James's Hospital.

The question of the provision of facilities for the treatment of both short and long-term orthopaedics also formed the subject of discussion with representatives of the West Riding County Council Public Health Committee. As a result of this discussion the County representatives expressed their agreement with

- (1) the concentration of short-term orthopaedics and fractures coming from the County at the Leeds General Infirmary and St. James's Hospital.
- (2) The principle of a joint scheme for the provision of orthopaedic facilities for long-term cases from the city and county.
- (3) The principle of a joint fracture service for city and county cases, subject to agreement later on the financial details.

It was, therefore, considered extremely desirable that these matters should be more fully explored, though as regards the establishment of fracture clinics it was felt that the matter could not proceed to a satisfactory conclusion until the Government had definitely indicated the extent to which it would provide financial assistance.

Members of the Advisory Committee and of the West Riding Public Health Authority visited the Marguerite Hepton Memorial Orthopaedic Hospital, Thorp Arch, when proposals were outlined for the erection of a new hospital of 200 beds and the authorities of the hospital indicated their willingness to provide accommodation to meet the needs of the Leeds and West Riding Authorities.

It was subsequently decided to refer to these authorities the question of utilising the proposed new hospital for purposes of their orthopaedic schemes, subject to adequate safeguards as to suitability of site, co-operation in design and construction, financial commitments and other matters, and, in the event of capital grants being sought, of an adequate and satisfactory measure of control. The two authorities have also been invited to appoint representatives on a sub-committee to meet the controlling body of the hospital to discuss preliminary details.

for Sick Children (Long-Term Cases).

Professor C. W. Vining, M.D., D.P.H., Hospital Accommodation F.R.C.P., submitted to the Committee a report detailing the position in the city of accommodation for the treatment of sick children, and outlining

the requirements necessary to make good the present deficiency. Consideration of this matter was linked up with the subject of orthopaedic treatment and as it was felt that the West Riding would have a direct interest in the question, the matter was discussed with the County representatives referred to in the preceding paragraph. As a result it is hoped that, subject to satisfactory financial and other arrangements, effective joint co-operation will be achieved in the establishment and user of a children's hospital, though a difference of opinion exists as to whether the new hospital should take long-term cases only, acute cases continuing to be admitted to the Leeds General Infirmary and "infectious cases" to St. James's Hospital, or whether it should deal with children of all types.

Mr. L. R. Braithwaite, M.B., CH.B., F.R.C.S., Radium Centre. presented to the Advisory Committee a report regarding the need for the establishment of a Radium Institute to serve the Leeds and West Riding areas, and at a meeting of the Committee at which representatives of the County Public Health Authority were in attendance he verbally amplified this report emphasising the results which had already been achieved and stressing the limitations of the present Centre due to the shortage of in-patient and out-patient accommodation and the increasing number of patients coming forward for treatment.

Members of the two authorities will shortly pay a visit of inspection to the Radium Centre at the Leeds General Infirmary, and it is anticipated that subsequently the proposal will receive further serious consideration.

Other matters affecting both the County and the County Borough discussed by the Further Methods of Advisory Committee were facilities for Joint Co-operation. Rheumatism Research and Maternity accommodation. These matters will receive further and more detailed consideration at subsequent meetings. Further, the West Riding Representatives agreed to furnish a statement indicating the County area to be served by Leeds Hospitals, the accommodation already available and suggestions for future development.

Other suggestions accepted by the Committee were: General. (a) That special departments should not be wholly centralised at the General Infirmary, but that certain departments should be provided at other institutions with the proviso that there should not be unnecessary duplication of staff and equipment.

- (b) That in cases admitted to the General Infirmary from the municipal hospitals for special treatment not available at the latter, consideration be given to the possibility of reimbursing the Infirmary the cost of such treatment.
- (c) That to meet the shortage of maternity bed accommodation resulting from the increased hospitalisation of maternity cases, a solution would need to be found either by increasing the accommodation or by a process of selection of cases for admission, or both. In this connection it was pointed out that the Maternity Hospital authorities were of the opinion that they had now reached approximately the effective maximum of bed accommodation and that the policy of the Board was to develop the hospital as a centre for consultation, research and training, and, therefore, to regard the hospital as peculiarly adapted for the reception of abnormal rather than normal cases. Proposals under consideration for enlargement and re-organisation were designed to increase the efficiency of the hospital in this direction rather than to add to the number of beds.

G. W. MARTIN,

Chairman.



